## FERNANDEZ & ASSOCIATES LLP

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PATENT ATTORNEYS AUG 1 0 2005

FACSIM	ILE TRANSMITTAL SHEET		
Vo, Tung T	Dennis S. Fernandez		
U.S. Patent & Trademark Office	8/10/2005		
FAX NUMBER: 571-273-8300	TOTAL NO. OF PAGES INCLUDING COVER:		
PHONE NUMBER: (571)272-7340	OUR REFERENCE NUMBER: FERN-P001B		
RE: 09/823,089 Office Action Response	OUR PAX NUMBER: (650) 325 1203		
□ URGENT ☑ FOR REVIEW □ PLE	ASE COMMEN'T  PLEASE REPLY  PLEASE RECYCLE		
NOTES/COMMEN'(5:			

#### Dear Examiner Vo:

On behalf of the Applicants, the following is a copy of the Amendment, filed in response to your Official Action dated 7/29/2005. Mr. Fernandez would like to have a teleconference regarding to the amendment. Mr. Fernandez's Assistant, Monica will contact you to schedule a teleconference.

The response was sent via Priority Mail on August 10, 2005. If you have any questions, please call me directly.

Sincerely,

Chris Vo

Legal Assistant

650-325-4999

chris@iploft..com

Certificate of Mailine	D. (016)
"EXPRESS MAIL" Mailing Label Number: EV	By "U.S. Express Mail" Under 37 C.F.R. 1.10(c)
I hereby certify that this paper and/or fee is being dep	12823025 US Date of Deposit:8/10/2005
TO ADDRESSEE" service under 37 C.F.R. 1.10 on the	Date of Deposit:8/10/2005
Name: Chris Vo	to Commissioner For Patents,
Name: <u>Chris Vo</u> <u>8/10/2005</u>	
Signature Date	- $        -$
Official Date	Signature
IN THE UNITED	STATES PATENT AND TRADEMARK OFFICE
In re Application of: Fernandez, et al	
Serial No.: 09/823,089	Attorney Dacket No. FERN P001B
Filed: 3/29/2001	Examiner: Tung T, Vo
For: Integrated Network for Monitoring Re	Art Unit: 2613
France Horwork for Mountoling Ke	mote Objects
Commissioner of Patents	
P.O. Box 1450	•
Alexandria, VA 22313-1450	
AME	NIDAMEATT TO ANYONA MEDICAL PROPERTY OF THE PR
1117141	YDMENT TRANSMITTAL LETTER
Dear Sir:	
1. TRANSMITTED DOCUMENTS, the	following documents relating to the above-identified patent application are
being transmitted becauses	following documents relating to the above-identified patent application, are
X a. An Amendment for this amplication	F approaction and
	on: 11 pages.
b. Substituted Formal Drawings:	sheets.
A Pention Por Extension of Time	By Decomposition of the second second
f. A Check (#) for \$	postcard, to cover required fees of this correspondence.
	to our required rees of this correspondence.
2. APPLICANT FILING STATUS:	•
a. Applicant is a Large Entity.	
X b. Applicant is a Small Entity.	
3. EXTENSION OF TIME:	
3. Applicant petitions for an extension	-Films 1
below (fees pursuant to 37 C.F.R. 1	of time under 37 C.F. R. 1.136 for the total number of months checked
Extension of Time	(4) (4).
One (1) many	Large Entity Fee Small Entity Fee
i. One (1) month.	\$ 120.00\$ 60.00
ii. Two (2) month.	\$ 450.00 \$ 225.00
iii. Three (3) month.	
iv. Four (4) month.	# 3 500 00
v. Five (5) month.	¥ .>0.00
,	\$ 2,160.00\$ 1080.00
Extension Time Fee Total:00	
<u> </u>	
X b. Applicant believes that no extension	of time is required. However, this conditional petition is being made in
case Applicant has inadvertently overl	ooked the need for a petition for average of the need for a petition for a petiti
hereby authorized to charge any neces	cooked the need for a petition for extension of time, the Commissioner is sary amount associated with this communication or credit any
overpayment to Deposit Account Nu:	500482
- F	ovviue.
•	
	•

4. FEE CALCULATION:

The fee f	or claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:
	the state of the s
*-	

Fce Items	Clatms Remaining After Amendment	Highest Number of Claims Previously Paid	Present Extra Claims	Fee Rate	Total
a. Total Claims	30	- 30=	0	x \$ 50.00 Large Entity x \$ 25.00 Smal) Entity	\$ .00
b. Independent Claims	2	- 2=	0	x \$200.00 Large Entity x \$100.00 Small Entity	\$ .00
	ndent Claims Added I	•		x 360.00 Large Entity x 180.00 Small Entity	
1. Extension of Time Fee Total, if any, from above EXTENSION OF TIMF section 3a.				\$ .00	
i) 1.17 (p) Fee  Total Fees	Required With This for Information Disc.	Correspondence osure under 1.97(c)			\$ .00
- I drai Life?					\$ .00

### 5. PAYMENT OF FEES

The full fee due in connection with this communication is provided as follows:

<del></del> .	The Commissioner is hereby authorized to charge the fees associated with this communication or credit any overpayment to Deposit Account No: 500482. A duplicate copy of this authorization is enclosed.			
-	A Check # for \$ for the above specified Total Fee is enclosed. However, should Applicant inadvertently miscalculated the required fee, the Commissioner is hereby authorized to charge the necessary additional amount associated with this communication or credit any overpayment to <b>Deposit Account No</b> : 500482.			
<u>_X</u>	Applicant does not believe that any payment of fcc is needed in association with this communication. However, should Applicant inadvertently miscalculated the required fce, the Commissioner is hereby authorized to charge any necessary amount associated with this communication or credit any overpayment to Deposit Account No: 500482.			
	Please direct all correspondence concerning the shove-identified application to the following address:			
CUSTOMER NO: 22877				

FERNANDEZ & ASSOCIATES, LLP
Patent Attorneys
P.O. BOX D
Menlo Park, CA 94025-6204
Phone: (650) 325-4999

Fax: (650) 325-1203

Respectfully submitted,

DENNIS S. FERNANDEZ Registration No. 34,160 \$110 1.2005 Date

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AUG 1 0 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventors:

FERNANDEZ et al.

Attorney Docket No.: FERN-P001B

Serial No.:

09/823,089

Group Art Unit:

2613

Filed:

03/29/2001

Examiner:

VO, TUNG T.

5 Title:

INTEGRATED NETWORK FOR MONITORING REMOTE OBJECTS

### **AMENDMENT**

Commissioner of Patents

P.O. Box 1450

10 Alexandria, VA 22313-1450

Sir:

In response to non-final Office Action dated 7/29/2005, please amend this application:

15 Amendments to Claims are reflected in listing of claims which begins on page 2.

Remarks begin on page 10.